

COVER PAGE

A PUBLIC DOCUMENT

Filed Date: 02/13/2019 07:44 AM
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Please type or print in ink.

NAME OF FILER (LAST) (FIRST) (MIDDLE)
Hanson Jennifer Lynn

1. Office, Agency, or Court

Agency Name (Do not use acronyms)

City of Lincoln

Division, Board, Department, District, if applicable

Your Position

City Manager

► If filing for multiple positions, list below or on an attachment. (Do not use acronyms)

Agency: Position:

2. Jurisdiction of Office (Check at least one box)

- ☐ State ☐ Judge or Court Commissioner (Statewide Jurisdiction)
☐ Multi-County ☐ County of
☒ City of Lincoln ☐ Other

3. Type of Statement (Check at least one box)

- ☐ Annual: The period covered is January 1, 2018, through December 31, 2018.
-or- The period covered is ____/____/____, through December 31, 2018.
☒ Assuming Office: Date assumed 01 / 09 / 2019
☐ Leaving Office: Date Left ____/____/____ (Check one circle.)
○ The period covered is January 1, 2018, through the date of leaving office.
-or-
○ The period covered is ____/____/____, through the date of leaving office.
☐ Candidate: Date of Election ____ and office sought, if different than Part 1: ____

4. Schedule Summary (must complete) ► Total number of pages including this cover page: 1

Schedules attached

- ☐ Schedule A-1 - Investments - schedule attached ☐ Schedule C - Income, Loans, & Business Positions - schedule attached
☐ Schedule A-2 - Investments - schedule attached ☐ Schedule D - Income - Gifts - schedule attached
☐ Schedule B - Real Property - schedule attached ☐ Schedule E - Income - Gifts - Travel Payments - schedule attached

-or- ☒ None - No reportable interests on any schedule

5. Verification

MAILING ADDRESS STREET CITY STATE ZIP CODE
(Business or Agency Address Recommended - Public Document)
600 6th St Lincoln CA 95648-1825
DAYTIME TELEPHONE NUMBER EMAIL ADDRESS
(916) 434-2493

I have used all reasonable diligence in preparing this statement. I have reviewed this statement and to the best of my knowledge the information contained herein and in any attached schedules is true and complete. I acknowledge this is a public document.

I certify under penalty of perjury under the laws of the State of California that the foregoing is true and correct.

Date Signed 02/13/2019 07:44 AM Signature Electronic Submission
(month, day, year) (File the originally signed paper statement with your filing official.)